



# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	10/617,345		
	Filing Date	07/09/2003	
	First Named Inventor	Davis	
	Group Art Unit	3676	
	Examiner Name	Gall, Lloyd A.	
Total Number of Pages in this Submission	5	Attorney Docket Number	TAL:0537.0120

## ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee transmittal form <input type="checkbox"/> Fee attached	<input checked="" type="checkbox"/> Drawing(s) (2 sheets)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Amendment <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s)	<input type="checkbox"/> Licensing Related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosures (identify below)
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts Under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Request for Refund	
	<input type="checkbox"/> CD, Number of Cd(s)	
Remarks: Other enclosures: 1. Return Receipt Postcard		

## SIGNATURE OF APPLICANT, ATTORNEY OR AGENT

Firm or Individual Name	Chernoff, Vilhauer, McClung & Stenzel L.L.P.
Signature	<i>Timothy A. Long</i>
Date	October 18, 2004

## CERTIFICATE OF TRANSMISSION/ MAILING

I hereby certify that, on the date shown below, this correspondence is being :			
<input type="checkbox"/> facsimile transmitted to the USPTO or			
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Type or print name	Timothy A. Long		
Signature	<i>Timothy A. Long</i>	Date	October 18, 2004